What is diabetes?

Diabetes mellitus, often referred to simply as diabetes, is a chronic disease. It occurs when the pancreas does not produce insulin, or when the body cannot effectively use insulin. Insulin helps to regulate the blood sugar level. Elevated blood sugar is a common effect of uncontrolled diabetes and over time seriously damages many organs of the body, especially the nerves and blood vessels.¹

Main Types

Type 1 diabetes occurs when the pancreas cannot produce insulin. Without insulin, this type rapidly becomes fatal. This type was previously called insulin-dependent or juvenile-onset diabetes. Symptoms of type 1 diabetes may occur suddenly.

Type 2 diabetes develops when the body cannot effectively use insulin. Type 2 accounts for 90-95 percent of people with diabetes nationwide. It was formerly called non-insulin-dependent or adult-onset diabetes. Its symptoms are often less marked. Thus, type 2 may be diagnosed several years after onset, when complications have already arisen. Check your risk of type 2 diabetes

Gestational diabetes is a form of glucose intolerance during pregnancy, and is usually diagnosed through prenatal screening, rather than reported symptoms. Women who have had gestational diabetes are more likely to develop type 2 diabetes later in life.¹

Risk Factors

Age (>45 years)
Obese or overweight
Family history
Gestational diabetes
Habitual inactivity
Race (minorities)
Pre-diabetes†
High blood pressure
High cholesterol

Check your diabetes risk

Consequences

Blindness
Nerve disorders
Kidney failure
Heart disease
Stroke
Diarrhea
Sexual dysfunction
Foot ulcers
Amputation
Teeth loss

Symptoms

Excessive thirst
Frequent urination
Constant hunger
Weight loss
Fatigue
Vision changes
Tingling/numbness
in hands or feet
Very dry skin
Frequent infections

†: Pre-diabetes is a condition in which individuals have blood sugar levels higher than normal but not high enough yet to be considered diabetes. People with pre-diabetes are at high risk of developing type 2 diabetes.

What is the burden of diabetes?

In 2007, it is estimated that 387,247 Missouri adults suffered from diabetes, with a prevalence of 8.7 per 100 people. The prevalence rate was highest in people over 65 years, males, and Hispanics. Diabetes also led to numerous emergency room visits, hospitalizations and deaths, and hospital costs totaled \$87.7 million in 2006. In addition, 97,924 Missouri adults had pre-diabetes. For detailed data, please use the six links in the following table.

Burden of Diabetes in Missouri, 2006 or 2007					
Disease	Year -	Whole State		People with	Click a Link for
Burden		Number	Rate	Highest Rate	Detailed Data
Diabetes					
Prevalence <i>a</i> ,3	2007	387,247	8.7 per 100	age≥65, males, Hispanics	<u>prevalence</u>
Emergency Room Visits ^{b,4}	2006	9,852	1.6 per 1,000	age≥65, blacks	emergency
Hospitalizations b,5	2006	10,469	17.6 per 10,000	age≥65, males, blacks	<u>hospitalization</u>
Death ^{b,6}	2007	1,435	22.2 per 100,000	age≥65, males, blacks	<u>mortality</u>
Economic Costs ^{b,7}	2006	\$87,738,839	<u>—</u>	age 45-64, males, whites	cost
Pre-Diabetes					

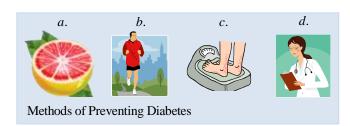
Page 1 June 2009



Diabetes

Fact Sheet, Missouri, 2008

http://health.mo.gov/living/healthcondiseases/chronic/diabetes/pdf/FactSheet.pdf



How is diabetes prevented?

Choosing a healthy lifestyle and using medication can largely prevent or delay the onset of type 2 diabetes.¹

- Reduce fat amount in foods, and eat more fiberrich foods, vegetables and fruits.
- Increase physical activity to moderate intensity, at least 30 minutes on most days.
- Keep body weight normal (body mass index, 18.5 - 24.9).
- Follow doctor's indication to use the drug metformin if a person has pre-diabetes and is at high risk for progression to diabetes.

Why is early diagnosis important?

Diagnosis of pre-diabetes provides a chance to prevent the onset of diabetes; early diagnosis for diabetes provides the opportunity to prevent development of complications. An inexpensive blood test can accomplish early diagnosis.

How is diabetes treated?

Control blood sugar

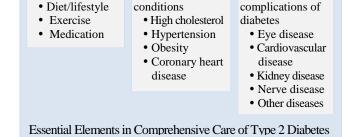
Diabetes cannot be cured, but proper treatment can delay or prevent development of diabetes and its complications. Treatment must be comprehensive and individually specific; the key is to keep blood

Management of

Type 2 Diabetes

Screen for/Manage

Treat associated



- Check blood sugar at least daily
- Follow specific advice from doctor
- Maintain blood sugar level as close to normal as possible



Control of Blood Sugar Levels

Standards of Care for Diabetes

Each visit to doctor, have a: Discuss with doctor:

- Blood sugar test and log record review
- Blood pressure check
- Foot exam
- A1C test, 2-4 times/year
- At least once a year, have a:
- Dilated eye exam
- Dental exam
- Blood cholesterol test
- Flu vaccine

- Diet
- Exercise
- Weight control
- Smoking cessation
- Use of medications

As indicated, have a:

- Urine kidney test
- Pneumonia vaccine

glucose levels as near normal as possible. While controlling blood sugar tends to dominate the care of type 1 diabetes, the management of type 2 diabetes must also include treating associated conditions (high cholesterol, etc.) and screening for/managing complications (eye disease, etc.). Good management should last for life and follow the Standards of Care.

Resource organizations

- 1. Missouri Diabetes Prevention and Control Prevention
- 2. Centers for Disease Control and Prevention
- 3. American Diabetes Association
- 4. Juvenile Diabetes Research Foundation International
- 5. National Institutes of Diabetes and Digestive and Kidney Diseases
- 6. National Heart, Lung, and Blood Institute-
- 7. National Diabetes Education Program
- 8. Other organizations

Data sources

- 1. Harrison's Principle of Internal Medicine, 17th edition, page 2275-2304, 2008
- 2. National Diabetes Statistics, 2007
- 3. Missouri County Level Study 2007
- 4. Emergency Room MICA, 1995-2006
- 5. Inpatient Hospitalization MICA, 1995-2006
- 6. Death MICA, 1997-2007
- 7. Calculated with a) charge-to-cost ratios and b) hospital charges from MICA, 2006
- 8. BRFSS, 2007, Centers for Disease Control and Prevention



June 2009 Page 2